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REQUEST

CONTINUED EXAMINATION (RCE) TRANSMITTAL

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mection of information unless it	displays a valid OMB control fluttiber.
Application Number	08/720,927
Filing Date	10/4/96
First Named Inventor	Asher Gil
Art Unit	2161
Examiner Name	E. Cosimano
Attorney Docket Number	PI/3C

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2. Submission required under 37 CFR 1.114 a. Previously submitted Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on ______ (Any unentered amendment(s) referred to above will be entered). Consider the arguments in the Appeal Brief or Reply Brief previously filed on ______ iii. 🗌 Other b. X Enclosed Information Disclosure Statement (IDS) i. X Amendment/Reply Other ii. Affidavit(s)/Declaration(s) Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for BECEIVED period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) OCT 0 2 2 102 b. Other OFFICE OF PETITIONS Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No.___ RCE fee required under 37 CFR 1.17(e) 10/01/2002 AWDNDAF1 00000075 08720927 Extension of time fee (37 CFR 1.136 and 1.17) 01 FC:279 370.00 OP Other b. Check in the amount of \$_370____ enclosed c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Name (Print lType)	Laura G. Barrow	Registration No. (Attorney/Agent) 35	35,437		
Signature	Al do	Date 9/27/02			

CERTIFICATE OF MAILING OR TRANSMISSION

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Name (Print/Type)	Laura G Barrow			
Signature	201	Date	9/27/02	

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